



Mississippi Rural Health Association

Crossroads

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18th Annual Conference brings record attendance

As the growth of the Mississippi Rural Health Association's membership has reached record levels, so too has the Association's largest conference. The 18th Annual Conference, held September 17-18 at The Hilton in Jackson, featured four pre-conference workshops and a host of quality speakers that addressed topics in two professional tracks: Policy Issues and Practical Applications.

The ever-popular Rural Health Clinic Workshop boasted a capacity crowd as guests received tools from Joanie Perkins of North Sunflower Regional Medical Center. Other workshops included Smoking Cessation and Reduction in Pregnancy Treatment, Mission Impossible: Providing Health IT Training in Rural Areas, and How to Start a Rural Health Clinic.

The main conference began with the President's Dinner and speaker Dr. David Dzielak, executive director of the Mississippi Division of Medicaid. Dr. Dzielak informed the crowd of the challenges facing Medicaid at this moment and the numbers behind the option to expand the program.

Opening the second day was Mississippi's Insurance Commissioner Mike Chaney. Comm. Chaney spoke primarily about the new health insurance marketplace, the challenges facing success of the marketplace, and what he expects in the future. After the conclu-

sion of Comm. Chaney's keynote presentation, the conference broke into its two professional tracks. Those in the Policy Issues track heard presentations from Mr. Robert Pugh and Ms. Aurelia Jones-Taylor of the Mississippi Primary Health Care Association, and Mr. Wayne Walters of North Sunflower Regional Medical Center. Those in the Practical Applications track enjoyed presentations by Ms. Maris Cooper of the Mississippi Insurance Department and Mr. Chip Templeton of Mississippi State University's e-BEAT.

During lunch, the Association's legislative session was

held with Senator Hob Bryan, Representative Sam Mims, and Representative Bobby Howell. The three legislators addressed questions from the audience and helped to illustrate the battle that will be forthcoming in the state legislature in the spring session.

Afternoon conference speakers included Ms. Wanda Jones of the Mississippi Office of Nursing Workforce and Ms. Melanie Bowman of the Mississippi State Department of Health in the Policy Issues track, and Mr. Mark Garriga of Butler Snow and Dr. Lessa Phillips of United Healthcare. The closing speaker for the
(continued on page 3)



Dr. David Dzielak, Executive Director of the Mississippi Division of Medicaid, presented facts about the expansion of Medicaid during the MRHA Annual Conference President's Dinner.

Barefield awarded the Mary Ann Sones Distinguished Leadership Award

Dr. Alan Barefield, Professor at Mississippi State University Extension Center, was recently awarded the Mary Ann Sones Distinguished Leadership Award, the highest award given by the Mississippi Rural Health Association, during its annual business meeting. This award is given to a member of the Association who has dedicated a significant portion of his or her career to advancing rural health care as well as for exceptional dedication and leadership to the Association.

An Extension Professor since 2003, Dr. Barefield's primary interests are in the economic well-being of communities. His interests include the economics of public infrastructure, primarily water systems; regional economic analysis; small business development and entrepreneurship; and business expansion and retention programs. Dr. Barefield has been an active MRHA board member and served as president in 2011.

Dr. Barefield is shown at right, receiving this award from its namesake, Mary Ann Sones, dean emeritus of Hinds Community College's Nursing Program.

Congratulations, Alan, and thank you for all you do for rural communities and for the Mississippi Rural Health Association!



National Rural Health Day to be celebrated November 21, 2013

Rural communities are wonderful places to live and work, which is why nearly one in five Americans call them home. These small towns, farming communities and frontier areas are places where neighbors know and listen to each other, respect each other and work together to benefit the greater good. They are also some of the best places to start a business and test your "entrepreneurial spirit." These communities provide the rest of the country with a wealth of services and commodities, and they are the economic engine that has helped the U.S. become the economic power it is today.

These rural communities also have unique healthcare needs. Today more than ever, rural communities must address accessibility issues, a lack of healthcare



providers, the needs of an aging population, and larger percentages of un- and underinsured citizens. And rural hospitals, which are often the economic foundation of their communities in addition to being the primary providers of care, struggle daily as declining reimbursement rates and disproportionate funding levels make their job so challenging.

These are the reasons why the National Organization of State Offices of Rural Health sets aside the third Thursday of every November—November 21 in 2013—to celebrate

National Rural Health Day.

First and foremost, National Rural Health Day is an opportunity to honor the selfless, community-minded, "can do" spirit that prevails in rural America. But it also gives us a chance to bring to light the unique healthcare challenges that rural citizens face and showcase the efforts of rural healthcare providers, State Offices of Rural Health, and other rural stakeholders to address those challenges.

We know there is work to be done, but we also believe there is plenty to celebrate, and we invite you to join the celebration! For a glimpse at what some are planning, go to:

www.celebratethepowerofrural.org

—National Organization of State Offices of Rural Health

From the State Office of Rural Health director's desk

by Rozelia Harris



The Mississippi Office of Rural Health and Primary Care just began the third year of the Dentist Loan Repayment Program (MORHPC DLRP). The office is still partnering with the Mississippi Primary Health Care Association for administration of the project. We currently have 15 dentists participating in

the program and have 10 opportunities available at this time.

The MORHPC DLRP provides grant funds to participants to assist with repayment of outstanding qualifying educational loans. The program pays up to \$40,000 for a three-year full-time clinical service obligation. Applications are accepted on an on-going basis. Interested candidates must submit the MORHPC DLRP application to be considered for the program. Grantees must work at approved MORHPC DLRP sites. Sites must also submit a MORHPC DLRP site application.

Mississippi Qualified Health Center Grant Funds have priority status for placement of MORHPC DLRP grantees. Other sites may be considered based on the following:

- (1) Site located in a dental HPSA, has at least 30% Medicaid and/or uninsured patient load, and has a dentist vacancy
- (2) Site located in a dental HPSA, has at least 30% Medicaid and/or uninsured patient load, and has a retention need



Rozelia Harris, MBA
Director, MORH

For more information on the program, please visit the website at the following address:
www.mphca.com/Resources

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18th Annual Conference brings record attendance (continued)

(continued from page 1)
conference was Dr. Kristi Henderson of The University of Mississippi Medical Center. She addressed the growth of telemedicine as well as the regulatory challenges between the Mississippi Board of Nursing and the Mississippi Board of Medical Licensure.

The conference boasted a total attendance of more than 165 attendees. A tremendous group of exhibitors enjoyed time with Association members in order to inform them of the powerful tools at their disposal. Vendors at the conference were carefully selected in order to provide only the highest quality products. The Association will continue to advertise these vendors throughout the year for any attendees that wish to contact their representatives or for any members that were unable to attend.

Ryan Kelly, executive director of the MRHA writes, "We are very pleased with the outcome of this conference and for our great attendance. The speakers were

tremendous, the exhibitors were friendly and helpful, and the feedback has been very positive. We look forward to extending these resources throughout the state in the form of workshops during

2014 in order to best serve our membership."

For more information about the MRHA's 18th Annual Conference, call 601.898.3001.



Coding Corner

It's flu shot season again.

RHCs are not required to report separate revenue lines for influenza virus or

pneumococcal pneumonia vaccines on the 71x claims, as the cost for these services are not included in the encounter. Costs for the influenza virus or pneumococcal pneumonia vaccines are included in the cost report and no line items are billed. Coinsurance and deductible do not apply to either of these vaccines.

You may want to enter the flu vaccine and administration of the vaccine into your practice management system for tracking purposes, but you should not drop a bill.

Rural Physician Scholar poster contest winners announced

The Mississippi Rural Health Association is proud to announce the winners of the 2013 Rural Physician Scholar Poster Content. This contest was held during the 18th Annual Conference and voted on by members in attendance by determining quality and thoroughness of the students' community health assessment of their hometown.

Winners are as follows:

First place – Esosa Andrew Adan

Second place—Tameka Carmichael

Third place—Griffin Metcalf and Kacie Harris (tied).

The Association congratulates these recipients, who were awarded a cash prize for their efforts.

The Mississippi Rural Physician Scholars Program is a state-funded organization housed at The University of Mississippi Medical Center and is designed to recruit, train, and retain rural physicians in Mississippi.

The program is run by Dr. Wahnee Sherman. For more information about the program, call 601.815.9022.



MRHA 2013 president Sam Dawkins (far right), and Rural Physician Scholar poster contest winners (from right to left) Esosa Andrew Adan (first place); Tameka Carmichael (second place); Griffin Metcalf and Kacie Harris (tied for third place) and program director Dr. Wahnee Sherman are pictured immediately after the announcement of the students' awards at the MRHA annual conference.



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MRHA elects three new board members at annual business meeting



Mary Smith
Mississippi University for Women

The Mississippi Rural Health Association, in accordance with its governing bylaws, nominated and elected three new board members during its annual business meeting in September.

These board members include Ms. Susan Campbell, Director of Clinic Operations, Rush Foundation Hospital; Dr. Ray Newman, Chair and Professor, The University of Southern Mississippi's Department of Public Health; and Dr. Mary Smith, Assistant Professor of



Ray Newman
The University of Southern Mississippi

Nursing, Graduate Department, Mississippi University for Women.

These three board members were nominated by members of the Association and will serve a three-year term. Their terms officially begin in January 2014.

The Association has a 13-member board of directors that governs and oversees all operations.

For more information, contact the Association at 601.898.3001.



Susan Campbell
Rush Foundation Hospital



CommonHealth ACTION
Catalyst for health



The Mississippi Rural
Health Association
wishes to congratulate

Mary Smith

for being selected
for the

National Rural
Health Association's
2014 Rural Health
Fellows Program.

**Tobacco-Free Mississippi:
Engaging Rural Health Clinics**



CONGRATULATIONS!

Top 10 Rural Health Clinics
that participated in the
Mississippi Rural Health Association's
2012-2013 Tobacco Cessation Project

1. Louisville Medical Associates
2. Woman's Health Clinic of Grenada
3. Family Clinic of New Albany
4. Family Care Express in Collins
5. Family Care + Mooreville
6. Total Care of Sebastopol
7. Delta Regional Health Clinic
8. Green Tree in Mt. Olive
9. Acute Care + Family of Pontotoc
10. Family Care in Seminary

To qualify for the Top 10 Rural Health Clinics, each clinic:

- Completed the "5A's" or "2A's & R" tobacco cessation training
- Completed provider surveys
- Referred tobacco using patients to the Mississippi Tobacco Quitline

Tobacco-Free Mississippi: Engaging Rural Health Clinics project is funded by a grant from the Mississippi State Department of Health.

Rural Medical Scholars Program “grows local docs”



This summer, 19 talented high school students from across the state graduated from the Rural Medical Scholars program directed by Mississippi State University Extension Service. The program's objective is to “grow local docs” for the state—a state with the second-lowest number of physicians per capita in the country.

During the program, the Scholars enroll in two pre-medicine courses, shadow local physicians and participate in a variety of activities related to the life of a physician.

Two hundred and ninety-four students have graduated from the program since its beginning in 1998.

Funded by Mississippi State University Extension Service with additional support from the State Office of Rural Health, the program is producing



Above is a picture of the Rural Medical Scholars of 2013 and, hopefully a number of members of the Medical School Class of 2022. For more information, please contact Dr. Bonnie Carew, MSU Department of Food Science, Nutrition and Health Promotion, at 662-325-1321, bcarew@ext.msstate.edu, or visit the program website at www.RMS.msucare.com.

dividends for the state of Mississippi. Thirty-four former Scholars have gone on to medical school and 21 have graduated and are practicing physicians. In addition

to doctors, numerous others have gone into nursing, pharmacy, counseling, physical or occupational therapy, and medical research.



Always among the most popular sessions at the MRHA Annual Conference, the Legislative Panel features our state legislators' comments about issues they expect to address in the upcoming legislative session. This year, the MRHA appreciated the time and effort of our state legislators who presented an overview of upcoming legislative business affecting rural health and also addressed questions from the audience. From left, Representative Bobby Howell (R-MS 46th District), Representative Sam Mims (R-MS 97th District), and Senator Hob Bryan (D-MS 7th District) are shown as they conducted a panel discussion moderated by MRHA Executive Director Ryan Kelly (far right). The MRHA extends special thanks to these legislators.



Primary care shortfall could be worse than predicted

The U.S. appears to be falling behind in its effort to avert an impending primary care physician shortage, according to a recent study published in *Academic Medicine* that tracked the specialty choices of residents and fellows as they entered practice.

About a third of physicians who deliver patient care are family doctors, internists or pediatricians, according to the American Medical Association's 2013 *Physician Characteristics and Distribution in the U.S.* Yet, the *Academic Medicine* study found that of the new doctors being trained by U.S. physician training programs, only 24% go on to practice primary care.

The Association of American Medical Colleges predicts that by 2025, there will be a shortfall of 65,800 primary care doctors to serve the country's health care needs.

For the study in *Academic Medicine*, researchers mined the AMA Masterfile, the National Provider Identifier database, Medicare claims data, and information from the National Health Service Corps and the Accreditation Council for Graduate Medical Education to follow nearly 9,000 doctors who did their training at 759 teaching hospitals between 2006 and 2008.

They then examined what kind of care they delivered three to five years after training. The study said the 24% figure probably overestimates the share of doctors entering primary care because the data sources did not distinguish between internists practicing office-based primary care and those working as hospitalists. The AAMC says 17% of internists self-identify as hospitalists. Meanwhile, just 5% of the tracked residents went on to practice in rural shortage areas, said the study, posted online June 7.

"If residency programs do not ramp up the training of these physicians, the shortage in primary care — especially in remote areas — will get worse," said Candice Chen, MD, MPH, the study's lead author. A pediatrician, she also is assistant research professor of health policy at the George Washington University School of Public Health and Health Services in Washington.

Wide gaps in residency programs

Behind the low share of trainees entering primary care lies great variation among residency programs, the study found. For example, 158 of the 759 training sites studied produced zero primary care physicians, while 184 saw 80% or more of their residents go on to practice in primary care.

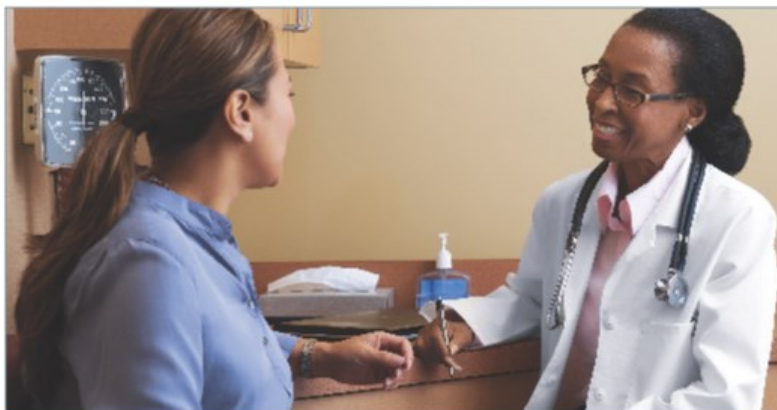
"We talk about the primary care shortage a lot in the aggregate," Dr. Chen said. "The reality is, it's the decisions that each of these programs make on their own that makes up the aggregate. It's worth looking at what each of these programs does on its own that affects the big picture on this."

A teaching hospital medical culture that prizes primary care practice can persuade more internal medicine resi-

dents to enter primary care instead of subspecializing, Dr. Chen said. Further research should be done to determine the factors associated with the training sites that produce higher shares of primary care doctors, she added.

Nearly \$13 billion in Medicare and Medicaid dollars go to graduate medical education annually. President Obama's fiscal 2014 budget proposes to reduce Medicare's contribution to GME by about 10% for a total cut of \$11 billion during the next decade. The AMA opposes the cuts and has argued that the restrictions on Medicare GME funding that took effect in 1997 ought to be reversed.

By Kevin B. O'Reilly
American Medical News staff
Posted July 17, 2013



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in rural Mississippi*

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National Rural Health Day

Celebrating the Power of Rural!



November 21, 2013

We invite you to join the celebration!

For a brief glimpse at what some are planning on or around November 21, go to
www.celebratepowerofrural.org